

FILED  
IN CLERKS OFFICE

2022 JAN 10 PM 12:38

U.S. DISTRICT COURT  
DISTRICT OF MASS.

Angel Santos w/0462

U.C.C.C

Administrative

Bridgette

2022  
2021

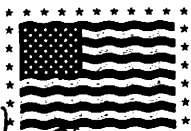
United State District Court


Clerk Office

Courthouse #23000

Boston, MA

02210




 Jan/7/2022  
 danden L  
 files Attached  
 -40795 for filing

Lowell Superior Court  
 not signed  
 due Jessi H. Cant

danden 2 g. w. her  
 judicial waive

the situation  
 cash firming  
 ASCEHIA d. 10/20/20

FILED  
 IN CLERK'S OFFICE  
 2022 JAN 10 PM 12:34  
 U.S. DISTRICT COURT  
 DISTRICT OF MASS.

Zashnce demands  
 judicial assurance

Zashnce not  
 viable

while Outskadia 9  
 Appeal + proper  
 false fabricated case  
 NOT

properly disposed  
 due fabricated  
 Presentation Appeal case

Angel Santos  
descendant

MICR 2012060  
Coall Superior  
Court Middlesex

check

Attached  
Newly discovered evidence  
with  
Prosecutor false filing  
omitting factor

newly discovered evidence  
review

Attached Prosecutor false  
presentation  
Coall Superior Twenty six  
4/28/14  
Judge Cibir Springs  
passed fabrication

Attached  
false presentation Prosecutor  
Grand Jury  
June/2012 MICR 20120607  
fabricated case  
without judicial review  
lack of proper diligence  
judicial process

*New York State Review*

LOWELL GENERAL HOSPITAL  
295 Varnum Avenue Lowell, Massachusetts 01854-2193 Phone: 978-937-6000

Patient: GONZALEZ, LUIS E  
MR#: 185776

DOB: 01/26/1990  
Location: ED  
PT Type: Emergency

Permar.

### Cardiac Tests

09/04/2010 03:41 EST CK Relative Index:  
CKMB(nGm/ml) RI  
Non-AMI: < or = 5  
Gray Zone > 5 NA  
AMI: > 5 < or = 4  
> 4

### Chemistry

09/04/2010 03:41 EST Troponin I:  
Troponin I is released 4 - 8 hours after onset of symptoms of Myocardial Infarction, peaks at 12 - 16 hours and remains elevated 5 - 9 days.  
0.000 - 0.045 nGm/ml Normal range.  
0.060 - 1.500 nGm/ml Indeterminate. Clinical correlation advised. Suggest repeat test in 3 - 6 hours.  
> 1.500 nGm/ml Consistent with Myocardial injury.

### Drugs (Urine)

Collected Date  
Collected Time

09/04/2010  
03:41 EST

#### Procedure

U Amphetamine Scrn  
U Barbiturate Scrn  
U Benzodiazepine Scrn  
U Cannabinoid Scrn  
U Cocaine Scrn  
U Ethanol  
U Ethanol Interp  
U Opiate Scrn  
Confirm Positive #

Screen Positive A  
Screen Negative  
Screen Negative  
Screen Positive A  
Screen Positive A  
25  
Negative  
Screen Negative  
Confirm Upon Request

#### Ref Range

[1000 nGm/mL Cutoff]  
[200 nGm/mL Cutoff]  
[200 nGm/mL Cutoff]  
[50 nGm/mL Cutoff]  
[300 nGm/mL Cutoff]  
[0-49]  
[2000 nGm/mL Cutoff]

Units

mg/dL

09/04/2010 03:41 EST Confirm Positive:  
Urine Drug Screening results are intended for medical management and treatment purposes only.

*negative*

newly discovered evidence

LOWELL GENERAL HOSPITAL

295 Varnum Avenue Lowell, Massachusetts 01854-2193 Phone: 978-937-6000

Permanent Medical Record

Patient: GONZALEZ, LUIS E

MR#: 185776

DOB: 01/26/1990

Location: ED

PT Type: Emergency

## Emergency Documentation

Document Name: ED Note-Physician

Document Status: Auth (Verified)

Performed By: Kareores MD, Christopher 09/04/2010 04:25 EST

Authenticated By: Kareores MD, Christopher 09/04/2010 05:31 EST

## Past Medical/ Family/ Social History

Medical history: Negative.

Surgical history: Negative.

Family history: Not significant.

Social history: Alcohol: Denies alcohol use, Tobacco: Denies tobacco use, Drugs: Denies drug use, Occupation: Unemployed, Family/social situation: Unmarried.

Problem list: Include problem list.

No problem items selected or recorded.

## Physical Examination

General appearance: Within normal limits and mild distress.

Immobilization: Backboard in place and cervical collar in place.

Skin: Within normal limits. Warm. Dry. No pallor. No rash. Good skin turgor.

Facial: Within normal limits

Problem area examination: Erythema, bleeding.

Eye: Within normal limits. Pupils equal, round, and reactive to light. Extraocular movements intact. Normal conjunctiva.

Ears, nose, mouth and throat: Within normal limits. Tympanic membranes clear. Oral mucosa moist. No pharyngeal erythema or exudate.

Ears, nose and throat: WNL

Airway: Patent.

Respiratory: Respirations nonlabored. sl. decreased on L. with mild upper crepitus.

Scalp: Tenderness L. inferior-occipital - GSW entrance wound abrasion by L. temporal area.

Neck: Within normal limits, supple, trachea midline, no tenderness.

Rectal: Within normal limits

Abdominal: Within normal limits. Soft. Nontender. Non distended. Normal bowel sounds. No organomegaly. no rebound or guarding.

Genitalia: Within normal limits. No tenderness. No discharge. Normal external genitalia.

Back: Within normal limits. Nontender. Normal range of motion. Normal alignment.

Pelvis: Within normal limits. No tenderness.

Chest wall: No deformity. small caliber GSW entrance by inferior L. mid axilla area.

Extremity: Normal range of motion. Normal tone. No swelling. No tenderness. small caliber entrance to L. inferior medial deltoid area.

Legend: @ = Corrected A = Abnormal C = Critical L = Low H = High \* = Footnote # = Interpretive Data R = Ref Lab

Patient: GONZALEZ, LUIS E

N: 185776

Chart Request ID: 8781337

Print Date: 5/7/2012 07:52

Respectfully submitted,

MAURA HEALEY  
ATTORNEY GENERAL

/s/ Todd M. Blume  
Todd M. Blume (BBO No. 674608)  
Assistant Attorney General  
Criminal Bureau  
One Ashburton Place  
Boston, Massachusetts 02108  
(617) 727-2200, ext. 2503  
todd.blume@mass.gov

Dated: October 19, 2020

**CERTIFICATE OF SERVICE**

I hereby certify that a true copy of the above document was served upon the petitioner at the address below on October 19, 2020, by first-class mail, postage pre-paid, to him as follows:

Angel Santos  
W104612  
Old Colony Correctional Center  
1 Administration Road  
Bridgewater, MA 02324

/s/ Todd M. Blume  
Todd M. Blume



THE COMMONWEALTH OF MASSACHUSETTS  
GOVERNOR'S COUNCIL  
ROOM 184 • STATE HOUSE • BOSTON, MA 02133  
(617) 725-4016

April 2, 2012

Honorable John H. Lynch  
Governor of New Hampshire  
State House  
Concord, New Hampshire 03301

Re: Angel M. Santos, DOB: 03/15/89/Rendition

Dear Governor Lynch:

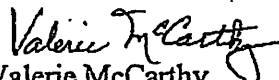
Enclosed herewith is the warrant signed by Governor Deval L. Patrick for the return of the above individual.

If and when you sign the warrant, in order to allow the agent from this Commonwealth to proceed, will you be kind enough to notify:

Honorable Gerard T. Leone, Jr.  
District Attorney, Middlesex County  
Middlesex Superior Courthouse  
200 Trade Center - 3<sup>rd</sup> Floor  
Woburn, MA 01801  
Attn.: Martha Coravos, Assistant District Attorney  
Tel. No.: (781) 897-8715

Thank you for your assistance in this matter.

Very truly yours,

  
Valerie McCarthy  
Executive Secretary  
Pro Tem

Enclosures  
Copy (2) to: As above & file



AP-15-539

Commonwealth v. Santos

say anything," which she apparently took as a threat which she reported to the police. The defense argues that the Commonwealth presented insufficient evidence to sustain the intimidation of a witness charge.

false presentation imposed  
ARGUMENT detached process

**I. NO ONE PROPERLY IDENTIFIED MR. SANTOS AS THE SHOOTER, NOR WAS ANY OTHER PHYSICAL OR TESTIMONIAL EVIDENCE OFFERED TO SUSTAIN HIS CONVICTION ON THE CHARGES OF ASSAULT TO MURDER OR THE GUN CHARGES.**

**A. Jason Hernandez's identification of Mr. Santos as the shooter should not have been admitted.**

As the Commonwealth contended at trial, "identification is going to be a key issue in this case, obviously, given that we only have one witness identifying the defendant as the alleged shooter." (Tr. IV: 5) The one witness was Jayson Hernandez. There are two main issues with the admissibility and reliability of Jayson's testimony.

First, Jayson never had identified Mr. Santos as the shooter before trial and had never seen him before the night of the incident. Compare *Commonwealth v. Crayton*, 47 Mass. 228, 245-46 (2014) In *Crayton*, the Supreme Judicial Court reasoned "in-court identification is



comparable in its suggestiveness to a show-up identification,” and may even be more suggestive because “where the prosecutor asks the eyewitness if the person who committed the crime is in the courtroom, the eyewitness knows that the defendant has been charged and is being tried for that crime.” Furthermore, “the presences of the defendant in the courtroom is likely to be understood by the eyewitness as confirmation that the prosecutor, as a result of the criminal investigation, believes that the defendant is the person whom the eyewitness saw commit the crime.” *Id.* at 237

Although the court in *Crayton* did not reach this conclusion, the defense argues that this presumption—that a first-time, in-court identification helps confirm for the eyewitness that the defendant is the person who committed the crime—applies to the jury as well. If, as in this case, the eyewitness is unreliable for other reasons (e.g., he is immunized and thus has a reason to cooperate with the Commonwealth or, more importantly, had testified under oath before a grand jury that he did not see the shooter’s face that night at all, and had never identified him before trial).

COMMONWEALTH APPEAL COURT  
AP 18534  
Id. In this case, the trial judge, after explaining

what a grant of immunity was, stated:

In assessing the credibility of a witness you may consider whether the witness has received a grant of immunity or whether he has been promised or has received some benefit that may have induced him to testify or to testify in a particular manner. These are some of the tools that are at your disposal to resolve the disputed issues of fact in this case.

(Tr. IV:53.) The trial judge also explained generally how to assess the credibility of witnesses, including how the jury can evaluate prior inconsistent statements. (Tr. IV: 51-54.) Here, as in DePina, "[t]he instructions were more than sufficient to inform the jury of the dangers of exclusive reliance on immunized witness testimony." Id.

IV. SUFFICIENT EVIDENCE WAS PRESENTED THAT THE DEFENDANT WAS THE SHOOTER, INTENDED TO MURDER THE VICTIM WITH A FIREARM WHEN HE FIRED MULTIPLE SHOTS AND THEN STOOD OVER THE VICTIM AND ATTEMPTED TO FIRE MORE SHOTS, AND THEN ENGAGED IN WITNESS INTIMIDATION WHEN HE TOLD THE VICTIM NOT TO TALK TO THE POLICE AT THE HOSPITAL.

The defendant alleges there was insufficient evidence for the jury to convict on all charges. (D. Br. 35-42.) Besides asserting that the immunized

*newly discarded*

LOWELL GENERAL HOSPITAL

295 Varnum Avenue Lowell, Massachusetts 01854-2193 Phone: 978-937-6000

Patient: GONZALEZ, LUIS E

MR#: 185776

DOB: 01/26/1990

Location: ED

PT Type: Emergency

Permanent Medical Record

## Emergency Documentation

Document Name: Depart Summary  
Document Status: Modified  
Performed By: Atkinson RN, Brenda 09/04/2010 07:49 EST  
Authenticated By:

### PHYS DOC NOTES

Patient: GONZALEZ, LUIS E MRN: 185776 FIN: 002064158  
Age: 20 years Sex: Male DOB: 01/26/90  
Author: Kareores MD, Christopher  
Attachments: None

### Basic Information

Time seen: Date & time 09/04/10 03:27:00.

History source: Patient, EMS.

Arrival mode: Ambulance-BLS.

Prehospital treatment: Per nursing notes, ALS protocol.

( ) Vital signs: (Date Range: 09/03/10 0:00 - 09/04/10 4:16 ).

Medications: .

#### Medication Orders

cefazolin, Dose: 2 Gm, Injection, IV Piggyback, Once, STAT, Start Date/Time: 09/04/10 4:16:00 EDT, Dilute in 100 mL D5W. Infuse over 30 minutes.

tetanus toxoid (Td - Tetanus Diphtheria) (tetanus toxoid), Dose: 0.5 ml, Injection, IM, Once, Routine, Start Date/Time: 09/04/10 5:00:00 EDT

### Allergies:

No active allergies have been recorded.

Immunizations: Unknown.

History limitation: None.

Notes: Chief Complaint from Nursing Triage Note : (Date Range: 09/03/10 0:00 - 09/04/10 4:16 ).

### History of Present Illness

The patient is a 20 years old Male who presents with multiple gunshot wounds. The occurrence was 30 minutes prior to arrival. Location wound: Entrance wound: L. back scalp; L. axilla and L. deltoid. The degree of bleeding is minimal. The degree of pain is minimal. There are mitigating factors including backboard, cervical collar, oxygen and intravenous fluids. Firearm: unknown. The range was unknown. Circumstances: unknown. Pt required needle decompression on L. for tachycardia/hypotension and decreased breath sounds - Pt states heard 3 gunshots and felt he got hit - saw gunman who came towards him and Pt states he hit gunman who left..

Legend: @ = Corrected A = Abnormal C = Critical L = Low H = High \* = Footnote # = Interpretive Data R = Ref Lab

Patient: GONZALEZ, LUIS E  
MRN: 185776

Chart Request ID: 8781337

Print Date: 5/7/2012 07:52

4/28/14

Newly  
discovered  
Attached

~~Jaschhenn~~  
Jaschhenn

~~Penalty~~ Lowell  
Jaschhenn

~~Voiced~~  
Judge  
1661025

Q. Smoking marijuana?

A. Excuse me?

Q. Smoking marijuana?

A. No, I don't smoke.

Q. You don't smoke marijuana?

A. No.

Q. Were you doing anything else besides drinking beer,  
drinking anything else?

A. Just beer.

Q. And fair to say that Luis was drinking?

A. Yes.

Q. And Junior was drinking?

A. Yes.

Q. Carlos?

A. Yes.

Q. It's fair to say that everybody there was drinking?

A. Yes.

Q. And you testified that approximately twenty-five people  
were at her apartment, correct?

A. Yes.

Q. Now you were fairly familiar with the apartment on  
September 3rd and September 4th, 2010, weren't you?

A. Yes.

Q. You'd been there a number of times, right?

A. Yes.